FORM D

MAR 1 2 2009 E

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION 1178193 OMB APPROVAL

OMB Number: 3235-0076

Expires: February 28, 2009

Estimated average burden Hours per response: 4.00

| *************************************** | |
|--|--|
| Name of Offering (check if this is an amendment and name has changed, and Owl Creek Overseas Fund, Ltd. | indicate change.) |
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 5 | 506 Section 4(6) ULOE |
| Type of Filing: New Filing Amendment | |
| A. BASIC IDENTIFICA | TION DATA LUEM 191 LON |
| 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicowl Creek Overseas Fund, Ltd. | icate change.) 09004457 |
| Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Bermuda) Limited, Wessex House, 45 Reid Street, HM 12 Bermuda | , Hamilton Telephone reamour (including Area Code) 441-295-7149 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices) | e) Telephone Number (Including Area Code) |
| Brief Description of Business To operate as a private investment fund. | |
| Type of Business Organization corporation limited partnership, already formed | other (please specify): Cayman Islands exempted compan |
| ☐ business trust ☐ limited partnership, to be formed | |
| Actual or Estimated Date of Incorporation or Organization: Month 01 | Year |
| Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service a CN for Canada; FN for other foreign | |
| | 200 500 1 1 1 1 1 1 C 1 1 1 1 5 D (17 CED |

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| | | | A. BASIC IĐEN | TIFICATION DATA | | |
|-------------|--|----------------------|---|--|---------------------------------------|---------------------------------|
| 2. F | Enter the information | n requested for th | e following: | | | |
| C | Each promoter | of the issuer, if th | e issuer has been organized | within the past five years; | | |
| (| Each beneficia of the issuer; | l owner having the | e power to vote or dispose, | or direct the vote or disposition | n of, 10% or more o | f a class of equity securitie |
| (| Each executive | officer and direct | or of corporate issuers and | of corporate general and mana | ging partners of par | nership issuers; and |
| C | Each general a | nd managing parti | ner of partnership issuers. | | | |
| Check Box | x(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| | (Last name first, if Altman, Jeffrey A. | individual) | | _ | | |
| Business o | or Residence Addres 540 Fifth Avenue | | er and Street, City, State, Zi York, NY 10019 | p Code) | | |
| Check Box | k(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | □ Director | General and/or Managing Partner |
| | (Last name first, if Pilgrim, Ian | individual) | | | • | |
| Business o | or Residence Addres | | er and Street, City, State, Zi a) Limited, Wessex House | p Code) e, 45 Reid Street, Hamilton | HM 12 Bermuda | |
| Check Box | ((es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | □ Director | General and/or Managing Partner |
|] | (Last name first, if nterAtlantic Service | es Ltd. | | | | |
| | or Residence Addres c/o Citco Fund Se | | er and Street, City, State, Zip a) Limited, Wessex House | p Code) e, 45 Reid Street, Hamilton | HM 12 Bermuda | |
| Check Box | x(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | Director | General and/or Managing Partner |
| Full Name | (Last name first, if | individual) | | | | |
| Business o | or Residence Addres | ss (Numbe | er and Street, City, State, Zi | p Code) | ., | |
| Check Box | k(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name | (Last name first, if | individual) | | | · · · · · · · · · · · · · · · · · · · | |
| Business o | r Residence Addres | ss (Numbe | er and Street, City, State, Zi | p Code) | | |
| Check Box | k(es) that Apply: | Promoter | Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name | (Last name first, if | individual) | | | | |
| Business o | or Residence Addres | ss (Numbe | er and Street, City, State, Zip | p Code) | | |
| Check Box | k(es) that Apply: | Promoter | ☐ Beneficial Owner | Executive Officer | Director | General and/or Managing Partner |
| Full Name | (Last name first, if | individual) | | | | |
| Business o | or Residence Addres | ss (Numbe | er and Street, City, State, Zi | p Code) | | |
| | | | | | | |

| | | | | | B. | INFORMA | TION ABO | OUT OFFE | RING | · | | | |
|------------|--------------------------|------------------------------|--|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|------------------------------|---|
| 1. 1 | Has the A | issuer sole | d, or does the | ne issuer in lix, Columi | tend to sell | , to non-ac g under UL | credited in | vestors in t | his offering | ? | Yes | No ⊠ | |
| 2. | | | | | | | | | | 000,000 | * | | |
| | *\$ | ubject to the | he discretio | n of the Bo | ard of Dire | ectors to ac | cept lesser | amounts. | | | Yes | . No | |
| 4. | Enter th | e informat | permit join | ed for each | person wh | o has been | or will be | paid or giv | en, directly | or indirect | 🔯 ly, any con | mmission or | similar |
| ; 1 | agent of | a broker of to be liste | solicitation or dealer re d are associ | gistered wi | th the SEC | and/or with | h a state or | states, list | the name of | f the broker | or dealer. | If more that | ociated person or an five (5) only. Not |
| | | | , if individu | ial) | | | | | | | | | |
| Business | or Resi | dence Ado | iress (Num | per and Str | eet, City, S | tate, Zip C | ode) | | | **** | | | |
| Name of | Associa | ated Broke | r or Dealer | | | | | | | | | | |
| | | | ted Has Sol | | | olicit Purch | asers | | | | _ | ☐ All | States |
| [/ [] | AL] [L] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | (FL) [MI] | [GA] | [HI] [MS] | [ID] [MO] |
| | MTJ RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [T X] | (NM) (UT) | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] |
| Full Nam | ne (Last | name first | , if individu | ıal) | | | | | | | | | |
| Business | or Resi | dence Ado | dress (Num | per and Str | eet, City, S | tate, Zip C | ode) | • | | • | | | |
| Name of | Associa | ated Broke | r or Dealer | | | | | | | | | | |
| | | | ted Has Sol or check inc | | | olicit Purch | asers | | ,- | | | ☐ All | States |
| [] | AL] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | (FL) [MI] | [GA] [MN] | [HI] [MS] | [ID] [MO] |
| | MT] RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [T X] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA] [PR] |
| Full Nam | ne (Last | name first | , if individu | ıal) | | | ···· | | | | | · · · · · | |
| Business | or Resi | dence Ado | dress (Num | ber and Str | eet, City, S | tate, Zip C | ode) | | | | | | |
| Name of | Associa | ated Broke | er or Dealer | | | | | | | ······································ | | | |
| | | | ted Has Sol or check inc | | | olicit Purch | asers | | | | | ☐ All | States |
| [1] [1] | AL] IL] MT] RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already s "none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the counter the securities offered for exchange and already exchanged. | old. Enter "0" if ansolumns below the am | swer i sounts | s s of |
|----|--|---|------------------|--------------------------------------|
| | Type of Security | Aggregate Offering Price | | Amount Already Sold |
| | Debt | \$ 0 | \$ | 0 |
| | Equity | \$300,000,000 | \$ | 428,529,890.21 |
| | [X]Common[]Preferred | | | |
| | Convertible Securities (including warrants) | \$ 0 | <u>\$</u> | 0 |
| | Partnership Interests | \$ 0 | \$ | 0 |
| | Other (Specify) | \$ 0 | \$ | 0 |
| | Total | \$300,000,000 | \$ | 428,529,890.21 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | _ | · |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this off amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | purchased securities Number Investors | and tl | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | . 68 | <u>\$</u> | 428,529,890.21 |
| | Non-accredited Investors | . 0 | | 0 |
| | Total (for filing under Rule 504 only) | · | \$ | |
| 3. | Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this of type listed in Part C - Question 1. | s sold by the issuer, the fering. Classify secu | ırities | e, in by Dollar |
| | Type of Offering | Securit | | Amount Sold |
| | Rule 505 | · | | <u>\$</u> |
| | Regulation A | · | | \$ |
| | Rule 504 | • | | \$ |
| | Total | · | | \$ |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securitie amounts relating solely to organization expenses of the issuer. The information may be given as subject the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | ect to future conting | xcluc encie: | le s. If |
| | Transfer Agent's Fees | [|] | \$0 |
| | Printing and Engraving Costs | [| x] | <u>\$*</u> |
| | Legal Fees | [| x] | <u>\$*</u> |
| | Accounting Fees | [| x] | <u>\$*</u> |
| | Engineering Fees | [| 1 | \$0 |
| | Sales Commissions (specify finders' fees separately) | [|] | \$0 |
| | Other Expenses (identify) | | x] | <u>\$*</u> |
| | Total | [| x] | \$ 100,000* |

^{*}All offering and organizational expenses are estimated not to exceed \$100,000.

| | C. OFFERING PRICE, NUMBER OF INV | VESTORS | , EX | PEN: | SES AND USE OF | PRO | CEF | EDS |
|-----|--|----------------|-------------|------------|--|-------|--------|-----------------------|
| | b. Enter the difference between the aggregate offering price given i expenses furnished in response to Part C - Question 4.a. This differ issuer." | ence is the | adj: | ustec | l gross proceeds to | the | | \$299,900,000 |
| 5. | Indicate below the amount of the adjusted gross proceeds to the issupurposes shown. If the amount for any purpose is not known, furnisestimate. The total of the payments listed must equal the adjusted g C - Question 4.b above. | sh an estin | iate a | ind cl | neck the box to the | left | of the | |
| | | - | | | Payments to Officers, Directors, & Affiliates | | | Payments to Others |
| | Salaries and fees | | [|] | \$ | [|] | \$ |
| | Purchase of real estate | | [|] | \$ | [| 1 | \$ |
| | Purchase, rental or leasing and installation of machinery and equipment of the state of the stat | nent | [| 1 | \$ | ſ |] | \$ |
| | Construction or leasing of plant buildings and facilities | | [|] | \$ | [|] | <u>\$</u> |
| | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets securities of another issuer pursuant to a merger) | | [| 1 | \$ | Į |] | \$ |
| | Repayment of indebtedness | | [|] | \$ | [|] | \$ |
| | Working capital | | [|] | \$ | [|] | \$ |
| | Other (specify): Investment Capital | | [X |] | \$299,900,000 | ľ. |] | <u>\$</u> |
| | Column Totals | | (X | :] | \$299,900,000 | [|] | \$ |
| | Total Payments Listed (column totals added) | | | | [X] <u>\$</u> | 299,9 | 0,00 | 00 |
| _ | D. FEDÉ | RAL SIGI | ŀATU | JRE | | | | |
| sig | e issuer has duly caused this notice to be signed by the undersigned donature constitutes an undertaking by the issuer to furnish to the U.S. Sormation furnished by the issuer to any non-accredited investor pursuant | Securities a | nd E | xcha | nge Commission, u | | | |
| Iss | uer (Print or Type) | ghayac | V | / - | | | | Pate |
| Ov | vl Creek Overseas Fund, Ltd. | 7),4 | \triangle | | | | - | 3/3/09 |
| Na | me of Signer (Print or Type) | tle of Sign | er (P | nt o | r Type) | | | - |
| Jef | frey A. Altman Di | irector | | | | | | |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

| | | E. STATE SIGNATURE | |
|-----|--|--|---|
| 1. | Is any party described in 17 CFR 230.262 presently | subject to any of the disqualification provision | Yes No ns of such rule? |
| | See Appendix, | Column 5, for state response. Not applicable | |
| 2. | The undersigned issuer hereby undertakes to furnis (17 CFR 239,500) at such times as required by state | | nich this notice is filed, a notice on Form D |
| 3. | The undersigned issuer hereby undertakes to furnis offerees. Not applicable | h to the state administrators, upon written req | uest, information furnished by the issuer to |
| 4. | The undersigned issuer represents that the issuer is Offering Exemption (ULOE) of the state in whice exemption has the burden of establishing that these | th this notice is filed and understands that | the issuer claiming the availability of this |
| | ne issuer has read this notification and knows the cadersigned duly authorized person. | ontents to be true and has duly caused this | notice to be signed on its behalf by the |
| Iss | suer (Print or Type) | Signatur | Date |
| Ov | wl Creek Overseas Fund, Ltd. | | 7409 |
| Na | ame (Print or Type) | Title (Print or Type) | |
| lef | ffrey A Altman | Director | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| ΩWI | CREEK | OVERSEA | CIVITA 2. | LTD |
|-------------|--------|----------------|-----------|-----|
| UYYL | CILLIA | OYDINOLO | שוטוט | |

| | | | OWL | CREEK OV | 'ERSEAS FUN | D, LTD. | <u> </u> | , | |
|-------|---|--------------------|--|--------------------------------------|---|--|----------|----------------|----|
| 1 | 2 | | 3 | | 4 | | | 5 Indicable | |
| | Intend to non-accr investors (Part B-I | edited in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | Type of | Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | | |
| State | Yes | No | Common Stock Class A & B U.S. \$0.01 per share \$300,000,000 | Number of Accredited Investors | Amount | Number of Non- Accredited Investors | Amount | Yes | No |
| AL | | X | X | 1 | \$5,000,000 | 0 | 0 | | |
| AK | | | | | | | | | |
| AZ | | X | X | 2 | \$7,500,000 | 0 | 0 | | |
| AR | | | | | | | | | |
| CA | | X | X | 19 | \$79,882,043.21 | 0 | 0 | | |
| СО | | X | X | 1 | \$422,472 | 0 | 0 | | |
| СТ | | | | | | | | | |
| DE | | | | | | | | | |
| DC | | | | | | | | | |
| FL | | X | X | 4 | \$8,800,000 | 0 | 0 | } | |
| GA | | | | | | | | | |
| HI | | - | | | | | <u></u> | | |
| ID | | | | | | | | | |
| IL | | X | X | 3 | \$8,500,000 | 0 | 0 | | _ |
| IN | | Х | X | 1 | \$14,000,000 | 0 | 0 | | |
| ΙA | | Х | X | 1 | \$3,800,000 | 0 | 0 | | |
| KS | | | | | | | | | |
| KY | | | | | | | | | |
| LA | | Х | X | 1 | \$3,000,000 | 0 | 0 | | |
| ME | | | | | | | | | |
| MD | | | | | | | | | |
| MA | | х | Х | 3 | \$14,000,000 | 0 | 0 | | |
| MI | | | | _ | | | | | |
| MN | | | | | | | | | |
| MS | | | | | | | | | |
| МО | | | | | | | | | |

APPENDIX

OWL CREEK OVERSEAS FUND, LTD.

| OWL CREEK OVERSEAS FUND, LTD. 1 | | | | | | | | | 5 |
|-----------------------------------|--|--------------------------------|--|--------------------------------------|---|--|-------------|----------|--------------|
| ı | Intend to non-acci investors (Part B- | sell to redited in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | Type of | Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | | |
| State MT | Yes | No | Common Stock Class A & B U.S. \$0.01 per share \$300,000,000 | Number of Accredited Investors | Amount | Number of Non- Accredited Investors | Amount | Yes | No |
| | | | • | | | - | | - | |
| NE | | | | | <u> </u> | | | | - |
| NV NH | | | | | | | | | <u> </u> |
| NJ | 1 | Х | X | 1 | \$1,900,000 | 0 | 0 | | |
| NM | | | | <u> </u> | | | | | |
| NY | | X | X | 11 | \$69,225,375 | 0 | 0 | | |
| NC | 1 | X | X | 1 | \$7,000,000 | 0 | 0 | . | |
| ND | | | | | | | | | |
| ОН | | Х | Х | 2 | \$9,000,000 | 0 | 0 | | |
| ОК | | Х | Х | 1 | \$6,000,000 | 0 | 0 | ļ ———— | |
| OR | 1 | Х | X | 1 | \$5,000,000 | 0 | 0 | | |
| PA | | Х | Х | 7 | \$85,300,000 | 0 | 0 | | |
| RI | | | | | · | | | | |
| SC | | | | | | | | | |
| SD | | | | | | | | | |
| TN | | X | X | 1 | \$2,000,000 | 0 | 0 | | |
| TX | | Х | Х | 4 | \$88,500,000 | 0 | 0 | | |
| UT | | | | | | | | | |
| VT | | | | | | | | | |
| VA | | X | X | 2 | \$6,700,000 | 0 | 0 | | |
| WA | <u> </u> | | | | | | | | |
| WV | | | | | | | · · · | | |
| WI | <u> </u> | X | Х | 1 | \$3,000,000 | 0 | 0 | | _ |
| WY | <u> </u> | | | | | | · | | - |
| PR | | | | | | <u> </u> | | | |

END